

UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No.	0380-P02960US1		
		First Named Inventor		HERRON, Paul	
		Title	METHODS AND MATERIALS FOR GENERATING GENETIC DISRUPTIONS IN BACTERIAL CELLS		
Express Mail Label No.		EV325930098US		Date Mailed: July 31, 2003	
APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents.</i>			ADDRESS TO: Commissioner for Patents Mail Stop Patent Application P.O. Box 1450 Alexandria, VA 22313-1450		
1. <input checked="" type="checkbox"/> Fee Transmittal Form <i>(Submit an original, and a duplicate for fee processing)</i> 2. <input type="checkbox"/> Applicant claims small entity status <i>See 37 CFR 1.27</i> 3. <input checked="" type="checkbox"/> Specification <i>(preferred arrangement set forth below)</i> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R&D - Reference to sequence listing, a table or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings <i>(if filed)</i> - Detailed Description - Claim(s) - Abstract of the Disclosure					
7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program <i>(Appendix)</i> 8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> <ol style="list-style-type: none"> <input type="checkbox"/> Computer Readable Form (CRF) <input type="checkbox"/> Specification Sequence Listing on <ul style="list-style-type: none"> <input type="checkbox"/> CD-ROM or CD-R (2 copies); or <input type="checkbox"/> paper <input type="checkbox"/> Statement verifying identity of above copies 					
ACCOMPANYING APPLICATION PARTS <ol style="list-style-type: none"> <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <input type="checkbox"/> English Translation Document <i>(if applicable)</i> <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of Citations <input type="checkbox"/> Preliminary Amendment <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> <input type="checkbox"/> Request and certification for non-publication under 35 U.S.C. 122 <input type="checkbox"/> Other: _____ 					
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:					

Continuation Divisional Continuation-in-part (CIP) of prior application No.: _____
 Prior application information: Examiner _____

b. Priority Applications

In addition to any applications listed in 17a, the present application also claims priority to the following application(s), each of which is hereby incorporated herein by reference.

60/399,751 Filed July 31, 2002

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

CORRESPONDENCE ADDRESS

Please address all correspondence to Customer Number 000110 to the attention of the individual identified below.

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7/31/03

Date

22151 U.S. PTO
10/632398

07/31/03

FEE TRANSMITTAL

Complete if known

Application Number not yet assigned

Filing Date July 31, 2003

First Named Inventor **HERRON, Paul**

Group Art Unit

Examiner Name

Attorney Docket Number **0380-P02960US1**

TOT. AMT. OF PAYMENT: (1)+(2)+(3) = \$ 1,100.00

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to:

Charge indicated fees
 Charge additional fees
 Credit overpayments

to the account of DANN, DORFMAN, HERRELL AND SKILLMAN

Deposit Account Number 04-1406

2. Payment enclosed:

Checks in the amount of \$ 1,100.00

Check Nos. _____

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Fee Description	Fee Paid
Surcharge-late filing fee or oath	_____
Surcharge - late provisional filing fee or cover sheet	_____
Non-English specification	_____
For filing a request for reexamination	_____
Requesting publication of SIR prior to Examiner action	_____
Requesting publication of SIR after Examiner action	_____
Extension for response within first month	_____
Extension for response within second month	_____
Extension for response within third month	_____
Extension for response within fourth month	_____
Notice of Appeal	_____
Filing a brief in support of an appeal	_____
Request for oral hearing	_____
Petition to institute a public use proceeding	_____
Petition to revive unavoidably abandoned application	_____
Petition to revive unintentionally abandoned application	_____
Issue fee	_____
Petitions to the Commissioner	_____
Petitions related to provisional applications	_____
Submission of Information Disclosure Stmt.	_____
Recording each patent assignment per property (times number of properties)	_____
Filing a submission after final rejection (37 CFR 1.129(a))	_____
For each additional invention to be examined (37 CFR 1.129(b))	_____
Other fee (specify) <u>Advance Order (10 copies)</u>	_____
Other fee (specify) _____	_____

FEE CALCULATION

1. FILING FEE

Fee Description	Fee Paid
Utility filing fee	<u>750.00</u>
Design filing fee	_____
Plant filing fee	_____
Reissue filing fee	_____
Provisional filing fee	_____
SUBTOTAL (1)	\$ 750.00

2. CLAIMS

	Extra	Fee	Fee Paid
Total Claims			
Presented <u>40</u> - <u>20</u> = <u>20</u> x <u>18.00</u> = <u>360.00</u>	(a)		
Independent Claims			
Presented <u>1</u> - <u>3</u> = <u>0</u> x <u>84.00</u> = <u>0</u>	(b)		
Multiple Dependent Claim (first presentation)			
(a) Enter 20 or number previously paid for			
(b) Enter 3 or number previously paid for			
SUBTOTAL (2)		\$ 360.00	

SUBTOTAL (3) \$ _____

Submitted By:

Typed or

Printed Name Kathleen D. Rigaut, Ph.D., J.D.

Reg. Number 43,047

Signature Kathleen D. Rigaut

Date July 31, 2003

Deposit Account User ID

04-1406